

BOARD OF REGISTERED NURSING

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DIVERSION PROGRAM ROLE DELINEATION FOR NURSE SUPPORT GROUPS

The Board of Registered Nursing recognizes that a vital link in the recovery process is a strong on-going treatment program. One of the methods that can be employed to meet this need for recovering registered nurses is Nurse Support Groups.

The role of Nurse Support Groups in the Board's Diversion Program is to:

1. Share experience and provide strength, hope and support in addressing issues related to the process of recovery from the disease of chemical dependency.
2. Provide support regarding professional issues, including re-entry into the workplace.

The role of the Nurse Support Group Facilitator is to:

1. Facilitate the group meeting
2. Keep the group focused on the day-to-day professional issues and recovery process which supports a registered nurse's return to his/her profession in a manner which protects the health and safety of the public.
3. Apply the principles of interpersonal interaction group process while giving priority to recovery.
4. Provide input and recommendations relative to the needs of the Diversion Program participants.
5. Be supportive of the Board of Registered Nursing's Diversion Program.

The role of the Nurse Support Group Co-Facilitator is to:

1. Assist the primary Facilitator with group facilitation.
2. Act as a Facilitator in the absence of the primary Facilitator.

Nurse Support Group Facilitators and Co-Facilitators who participate in the Diversion Program must:

1. Believe in the chemical dependency disease concept, the total abstinence model of recovery and the 12-step program model.
2. Maintain participant confidentiality except when the participant is a threat to self or others or has signed a written consent for release of information.
3. Be prepared to respond to crisis situations by intervention or referral.
4. At a minimum, have weekly meetings, which are conducted by a Board approved Facilitator or Co-Facilitator.
5. Provide a Facilitator to nurse ratio not to exceed 15 participants per facilitator.
6. Not allow fees to be a barrier to a registered nurse's participation in the group.
7. Be a resource for additional supportive services.
8. Report weekly attendance to the Diversion Program Contractor.
9. Report relapse and relapse behavior to the Contractor.
10. Provide input and recommendations relative to Diversion participants' recovery to the Contractor.

Nurse Support Group Facilitators and Co-Facilitators must not recruit participants from their support group who are in the Diversion Program into their private practice for the purpose of providing therapy. Nurse Support Groups are not therapy groups and should not be run as therapy groups.